

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	018872.00167		
		First Named Inventor	Gorringer, et al.		
		COMPLETE IF KNOWN			
		Application Number	10/575,070		
		Filing Date	April 7, 2006		
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)	Group Art Unit		
			Examiner Name		

As a below named inventor, I hereby declare that:
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Modified Whole Cell, Cell Extract And OMV-Based Vaccines

(Title of the Invention)

the specification of which
☐ is attached hereto
 OR
☒ was filed on (MM/DD/YYYY) 04/07/2006 as United States Application Number or PCT International Application Number 10/575,070 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, or inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application (Numbers)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
0323709.6	GB	10/09/2003	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

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DECLARATION - Utility or Design Patent Application					
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U.S. Parent Application or PCT Parent Number			Parent Filing Date (MM/DD/YYYY)		Parent Patent Number (if applicable)
PCT/GB2004/004274			10/08/2004		
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:					
<input checked="" type="checkbox"/> Customer Number <div style="text-align: center;">OR</div> <input type="checkbox"/> Registered practitioner's name/registration number listed below		<div style="border: 1px solid black; padding: 2px; display: inline-block;">26712</div> <div style="margin-left: 10px;">→</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">Place Customer Number Bar Code Label Here</div>	
Name		Registration No.		Name	
Ranjana Kadle		40,041		R. Kent Roberts	
John M. Del Vecchio		42,475		George L. Snyder, Jr.	
Martin G. Linihan		24,926		Rebecca M. Stadler	
John D. Lopinski		50,846		Rachel S. Watt	
Robert S. Pippenger		59,008		Daniel C. Oliverio	
Thomas E. Popek		58,459		Edwin T. Bean, Jr.	
David L. Principe		39,336		40,786	
				37,729	
				56,703	
				46,186	
				33,435	
				16,639	
<input type="checkbox"/> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto					
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label <div style="border: 1px solid black; padding: 2px; display: inline-block;">26712</div> OR <input type="checkbox"/> Correspondence address below					
Name		Ranjana Kadle			
Address		Hodgson Russ LLP			
Address		One M&T Plaza, Suite 2000			
City		Buffalo		State New York	
				ZIP 14203-2391	
Country		United States		Telephone (716) 856-4000	
				Fax (716) 849-0349	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)) Andrew R.			Family Name or Surname Gorringe		
Inventor's Signature <i>A. R. Gorringe</i>				Date 24 JANUARY 2007	
Residence: City		State		Country	
SALISBURY		WILTSHIRE		UNITED KINGDOM	
Mailing Address					
C/O HEALTH PROTECTION AGENCY, PORTON DOWN					
City		State		ZIP	
SALISBURY		WILTSHIRE		SP4 0JG	
				Country	
				UNITED KINGDOM	
<input checked="" type="checkbox"/> Additional inventors are being named on the one supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet <div style="text-align: right;">Page 3 of 3</div>
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NAME OF SECOND INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Karen M.	Family Name or Surname Reddin		
Inventor's Signature <i>K.M. Reddin</i>			Date 24 JANUARY 2007
Residence: City SALISBURY	State WILTSHIRE	Country UNITED KINGDOM	Citizenship UNITED KINGDOM
Mailing Address C/O HEALTH PROTECTION AGENCY, PORTON DOWN			
City SALISBURY	State WILTSHIRE	ZIP SP4 0JG	Country UNITED KINGDOM
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Scott D.	Family Name or Surname Gray-Owen		
Inventor's Signature			Date
Residence: City Oakville	State Ontario	Country Canada	Citizenship Canada
Mailing Address 1283 Valerie Crescent			
City Oakville	State Ontario	ZIP L6J 7E7	Country Canada
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Ian C.	Family Name or Surname Boulton		
Inventor's Signature			Date
Residence: City Toronto	State Ontario	Country Canada	Citizenship Canada
Mailing Address 24 Noble Street, Suite 408			
City Toronto	State Ontario	ZIP M6K 2C8	Country Canada

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		Application Number	10/575,070
		Filing Date	April 7, 2006
		Group Art Unit	
		Examiner Name	

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(Title of the Invention)

the specification of which
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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/GB2004/004274	10/08/2004	

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<input type="checkbox"/> Customer Number <div style="text-align: center;">OR</div> <input type="checkbox"/> Registered practitioner's name/registration number listed below	→	<div style="border: 1px solid black; padding: 5px; text-align: center;">26712</div> <div style="text-align: center; font-size: small;">Place Customer Number Bar Code Label Here</div>
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Name	Registration No.	Name	Registration No.
Ranjana Kadle	40,041	R. Kent Roberts	40,786
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David L. Principe	39,336		

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Direct all correspondence to: ☒ Customer Number or Bar Code Label

26712

 OR ☐ Correspondence address below

Name	Ranjana Kadle				
Address	Hodgson Russ LLP				
Address	One M&T Plaza, Suite 2000				
City	Buffalo	State	New York	ZIP	14203-2391
Country	United States	Telephone	(716) 856-4000	Fax	(716) 849-0349

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Given Name (first and middle [if any])	Andrew R.		
Family Name or Surname	Gorringe		
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
SALISBURY	WILTSHIRE	UNITED KINGDOM	UNITED KINGDOM
Mailing Address			
C/O HEALTH PROTECTION AGENCY, PORTON DOWN			
City	State	ZIP	Country
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Inventor's Signature			Date
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Inventor's Signature			Date
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Mailing Address C/O HEALTH PROTECTION AGENCY, PORTON DOWN			
City SALISBURY	State WILTSHIRE	ZIP SP4 0JG	Country UNITED KINGDOM
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Scott D.		Family Name or Surname Gray-Owen	
Inventor's Signature			Date 24 January 2007
Residence: City Oakville	State Ontario	Country Canada	Citizenship Canada
Mailing Address 1283 Valerie Crescent			
City Oakville	State Ontario	ZIP L6J 7E7	Country Canada
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